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ABSTRACT

This final report describes a one-year research project on the characteristics of seriously emotionally disturbed (SED) and severely behaviorally disordered (SBD) students served by the Georgia Psychoeducational Program Network during 1984-1985 (n=5,008) and 1985-1986 (n=4,226), as well as characteristics of the 24 programs which served them. Questionnaire data indicated that a student in the program was more likely to be male than female, lived with either one or two parents, and was 9 years old or younger and in the third grade or below at program entry. Students were most likely to be referred from a public school special education class and returned to the same type of placement when exiting the program. A second, in-depth questionnaire focused on characteristics of 344 randomly selected students. Data on the educational background and professional experience of classroom, clinical, and administrative personnel were also collected and reported. A cost study examined Network funding sources, determined the cost per student served, and calculated alternative treatment costs, concluding that Network services were provided at less than one-sixth the cost of alternative service delivery models. Recommendations for further research conclude the report. (JW)

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PREFACE

This project was successful because of the joint commitment of the Georgia Department of Education, the Programs in the Georgia Psychoeducational Program Network, and the University of Georgia. Thanks for state support go to Joan A. Jordan, Director of the Program for Exceptional Children and Phillip H. Pickens, Coordinator of the Georgia Psychoeducational Program Network at the Georgia Department of Education. Particular appreciation for tireless efforts to collect and provide reliable and accurate data is expressed to the following directors and staff members of the Programs in the Georgia Psychoeducational Program Network: Larry Weiner (Director), Terry Fletcher, Paulette Stripland and Susan Wolkin (North Metro Program); Joseph Fehlig (Director), Bonnie Daniel, and Martha Massey (Oconee Area Program); Elizabeth Bell LeClair (Director), Marjorie Jennings, and Lyn Simonton (Middle Georgia Program); David Craddock (Director), Linda Phillips, Cynthia Daubenspeck, and Jan Norrell (Burwell Program); Patricia Hinely (Director) and Jeanne O'Conner (Chatham-Effingham Program); Robert Jacob (Director) and Kathy Graham (Rutland Program); Robert Gordon (Director), Penny Altenberg, Linda Dickson, Nancy Aloia, Samuel Taylor, and Pete Stellato (South Metro Program); Harry Hamm (Director), Darrell Pearson and Sam Herring (Comprehensive Psychoeducational Services Program); Michael Powell (Director), Jeannie Travillian, Pauline Terrell, Judy Barousse, and Susan Pilgrim (Cobb/Douglas Program); David Fallin (Director) and Kaye Bridges (Flint Area Program); George Andros (Director), Cathie Justen, Brenda Long, and Ruth Ann Sims (Child Development Program); Glenda Molton (Director)

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THE GEORGIA PSYCHOEDUCATIONAL PROGRAM NETWORK RESEARCH CONSORTIUM

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with
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EXECUTIVE SUMMARY

The Georgia Psychoeducational Program Network Research Consortium is composed of representatives from the Program for Exceptional Children, Georgia Department of Education, the 24 Programs in the Network, and the University of Georgia. The 24 community-based Programs which comprise the Network are state funded (Department of Education) and located throughout Georgia. The Network was begun in 1972 and now serves all severely emotionally disturbed and severely behaviorally disordered (SED/SBD) students in Georgia as one point on the continuum of services for this population. This research grant was conducted from September 1985 through December 1986. The Final Report is composed of the following sections: Preface, Executive Summary, Overview and Introduction, Methodology, Results, Discussion/ Recommendations, and Appendices. Dissemination efforts via conference presentations and published articles are being conducted at the writing of this report and additional analyses of data are being pursued based on input from the Consortium as well as interested state departments and other individuals and groups.

Methodology

The methodology focused on collecting data on severely emotionally disturbed and severely behaviorally disordered

(SED/SBD) students and their families served in the Georgia Psychoeducational Program Network during 1984-1985 and 1985-1986. The data were collected by program evaluators at each of the 24 programs. Research project staff conducted training on the completion of questionnaires on each topical area with emphasis on the provision of reliable and valid information. The questionnaire data were then entered on floppy computer disks on an IBM PC with subsequent analysis via the IBM 360 at the University of Georgia.

Results

Students. A 31 item questionnaire was completed on each DSM-III diagnosed SED/SBD student served in FY 1985 (n=5008) and FY 1986 (n=4226). Data from both years were consistent across all variables. While it is difficult to generalize concerning the characteristics and services rendered to these students, the results indicate that a SED/SBD student with a DSM III diagnosis was more likely to be male than female, lived with either one or two parents, and had never had a sibling who received Network services. While there was a wide variation in age and school grade at Program entry, one-half of the students were 9 years old or younger and in the 3rd grade or lower. At time of referral, they had usually been in public school, most frequently in a special education class. The Network services rendered were likely to be full or part-day classes. On the average, the students received 23 months of services during which time they made progress in their academic placement. When exited from the Program, they were more likely to be placed in a special education class than in regular education, and were not likely to be re-referred for Network services in the future.

A total of 344 students were selected in a stratified random sampling procedure proportional in representation to the FY 1985 population with regard to school program, race, sex, program location and DSM III diagnoses grouped into 12 discrete categories. While generalizations across characteristics and students are again difficult because of the variance, most students were in full-day or part-day placements, socialization and behavior goals accounted for over half of all the annual goals and short-term objectives, the PIAT achievement test was used most frequently to measure achievement, the IQ scores generally represented the lower end of the average range, 53% of the students received either free or reduced school lunches; and the average hours of contact with a student's parents, schools and other agencies totaled 18.1 hours annually. The six most common categories of referral problems were: disruptive behaviors, avoidance of peers, peer aggression, tantrums, lack of concentration and moodiness. These categories accounted for 40% of the referral problems reported.

Four specific hypotheses were tested using data from the FY 1985 sample. Regarding the differences between male and female students in the SED/SBD population compared to the general population, significant differences were found: Males outnumbered females on a 4:1 basis in the SED/SBD population, while the ratio in the general population was almost 1:1. Regarding race, it was found that in the general school age population 33% were black and 67% white while in the SED/SBD population it was found that 41% were black and 59% white--a statistically significant difference. Considering

possible rural and urban differences in numbers of students referred, the null hypothesis was accepted--no significant differences were determined. Also significantly more students were identified at kindergarten though grade 6 and significantly fewer were identified at grades 7 and above.

Personnel. The analyses of personnel data are grouped into three groups: classroom personnel (n=699), clinical personnel (n=242), and administrative personnel (189) for a total of 1130 personnel. Among classroom personnel, the lead teachers had either a bachelors or a masters degree and a large majority of the aides had high school diplomas. Almost all of the lead teachers were certified in the area of behavior disorders (BD) interrelated. Almost all classroom personnel had 2/3 of their professional experiences in the Network, generally at one Program. For clinical personnel, the most divergent group, more than half had masters, 6th year or doctoral degrees. This group included social workers, infant workers, psychologists, psychiatrists, psychometrists, and speciality therapists. Their certificates were mainly at the 4th and 5th year levels (bachelors and masters) although there were a significant number of 6 and 7 year certificates. The areas of certification for this group ranged over 19 areas including behavior disorders, infant care, psychology, social work, and visiting teacher. The clinical personnel averaged 7.1 years of experience. Seventy percent of their experience was in the area of ED/BD and in the Program where they are currently employed.

Regarding administrative personnel, of the 24 directors, 80% held the doctorate or the 6th year degrees with corresponding

levels of certification in several areas including administration, psychology, behavior disorders, school psychology and counselling. Of the 56 coordinators, 76% had masters degrees and 20% had 6th year degrees. Behavior disorders was the area of certification for 64% of these people. Concerning number of years of experience, the directors had 90% of their experience in the area of SED/SBD with 2/3 of that experience in the Network and over half of that experience in one Program; the coordinators had almost 90% of their experience in SED/SBD with 3/4 of that experience in the Network and most of it in one Program; program evaluators had almost all of their experience in SED/SBD and in one Program; and the secretarial and maintenance staff had almost all of their experience with one Program.

Cost. The Network cost estimates were based on all 9436 students served in the Network--including those students with and without DSM-III diagnoses--in 1984-1985. A total of $20.4--state and federal--supported the services. Cost categories with corresponding percents of money per category in total support were: Instructional Services (52%), Noninstructional services (20%), Staff Benefits (14%), Administration (9%), Maintenance and Operation (4%), Other (1%). The average cost for all students (Birth-18 years) was $2,162.67 (n=9436). For students in therapeutic classes only, the cost was $3,652.74 (n=4445), and for students with noninstructional services only, the cost was $835.61 (n=4991).

Dissemination efforts for project results are being pursued. One article has been published in Behavioral Disorders, another manuscript has been submitted to the Journal of Special

Education, one book chapter has been written on the history of the Network and is scheduled for publication in the coming year, one research presentation is being made at the International CEC Annual Meeting in April, 1987, and four manuscripts are under development for publication. Several presentations have been made to groups in Georgia as well.

Spinoffs from the project include two dissertations being developed on selected variables from the SED/SBD student data base and the exploration of DSM-III diagnostic categories. Additional interest in research has been generated and the Network will be publishing another Research Report in the Fall of 1987.

Those interested in obtaining additional information should contact:

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OVERVIEW AND INTRODUCTION

The purposes of this project were to conduct research on the education of seriously emotionally disturbed and seriously behaviorally disordered (SED/SBD) students in Georgia and to disseminate the results to program personnel, researchers, and policymakers in Georgia and across the nation. The research was conducted via a consortium composed of the Georgia Department of Education, the Georgia Psychoeducational Program Network (Network), and the University of Georgia. The Network is a state-wide service delivery system which provides comprehensive services to SED/SBD students from birth through 18 years and their families through multi-district school/community-based Programs. This Network of 24 Programs provides services to approximately 10,000 annually with over 4,000 of these students served in special psychoeducational classes.

The goal of this research project was expressed in one research question focusing on description and comparisons:

> What are the characteristics of SED/SBD students and their families? What are the characteristics of the teachers and related personnel who serve these students and their families? What are the characteristics of the Programs which serve these students and their families? How much does it cost to serve these students and their families? How do these students compare to their normal age peers in Georgia?

A related question concerning the comparison of SED/SBD students in Georgia to similar groups in other states proved not to be

feasible because of limitations in data sources in other states.

Research project products included a final report, articles in referreed journals, conference presentations, book chapters, and other presentations. The target audiences for these products included program personnel, researchers, and policymakers in Georgia and around the country.

Regarding methodology, the research question focuses on describing SED/SBD students and comparing them to others groups. The emphasis was on using extant data or easily collectible data to answer the question. Existing Program and financial records, along with a series of questionnaires were used to gather data. Designs were primarily static group comparisons. Analyses were primarily descriptive with some inferential statistics completed for hypotheses statements. The sample sizes for the studies ranged from 344 to 5008.

Dissemination efforts are in progress. One journal article has been published, one manuscript submitted for publication, one book chapter completed, and one presentation scheduled for the CEC Annual Meeting in April, 1987. Additional manuscripts are in preparation for journal articles.

Spinoffs include the development of dissertation topics for two doctoral students, the stimulation of additional research on DSM-III diagnoses, and the stimulation of more research in the Network.

This final report is composed of the remaining sections--methodology, results, discussion/recommendations, and appendices.

METHODOLOGY

The methodological emphasis was on the use of extant or easily collectible data. Consistent with this emphasis, a series of questionnaires were developed to facilitate data collection along with the use of existing monthly, annual, and financial reports.

Regarding the description of the SED/SBD students themselves, two questionnaires were developed. The first was a 31 item questionnaire providing a comprehensive description of each DSM-III diagnosed SED/SBD student. The questionnaire was drafted, pilot tested with three Programs in the Network, revised, and printed (see Appendix A for copy). Three workshops were then conducted for groups of the Programs in which both an administrator and the program evaluator from a Program were trained in data collection procedures. Emphasis was placed on providing reliable and valid data. Monitoring of data collection was provided by research project staff including phone calls for problems as well as the review of completed data sheets. These data were collected both for the students served in 1984-1985 and in 1985-1986. The collected data were entered on floppy disks on an IBM-PC with analysis by the IBM 360 at the University of Georgia using SAS analytical packages. This process required significantly more time than had been anticipated. Funds were contributed by the Network to assist in entering the data on the floppy disks.

The second questionnaire focused on more indepth questions concerning 344 students selected by a random stratified process.

This 27 item questionnaire was pilot tested with three Programs, revised, and printed (see Appendix B for copy). Data entry training and monitoring were conducted in a manner similar to the process with the first questionnaire. No workshops were conducted with this questionnaire based on feedback from the piloting process. These data were gathered only for 1984-1985 students. Written directions were developed and used with both questionnaires.

Existing personnel reports were used for data gathering for the analyses of personnel for 1984-1985. Existing financial reports were used for data gathering for the analyses of costs for 1984-1985. And existing records were used to complete the historical perspective.

The analyses of the data were conducted via SAS programs. Additional analyses of the data are continuing subsequent to the completion of federal support for this project.

RESULTS

The results of this research project are grouped in the following manner. The analyses of students (Students) are composed of three parts--(1) a quanitative study of Georgia SED/SBD students for 1984-1985 (n=5008) and 1985-1986 (n=4226) based on the first questionnaire, (2) further characteristics of Georgia's SED/SBD students (n=344)--and (3) a sample survey of students selected on a random stratified basis from the 1984-1985 group and using the second questionnaire, findings on several hypotheses comparing these students to their normal age peers. The analyses of personnel (Personnel) are provided as a separate presentation as are the analyses of cost (Cost).

A QUANTITATIVE STUDY OF GEORGIA SED/SBD STUDENTS (1984-1985 and 1985-1986)

Introduction

Over the past 11 years, the 24 programs comprising the Georgia Psychoeducational Program Network have collected the largest single body of information on severely emotionally disturbed (SED) children, ages 3 through 18, in the nation. The wealth of data consistently recorded each year by each of the 24 Programs in the Network affords an unusual opportunity to develop a unique body of knowledge concerning the characteristics of SED students, their families, and the programs which serve them.

A major portion of this Project study concerns characteristics of these SED students and their Programs. It is the purpose of this section of the report to present the results of the Project's demographic survey of SED students and the services that they received during the 1985 and the 1986 fiscal years.

Method

The desired information was obtained from each of the 24 Network Programs by requesting the Programs' directors and evaluators to prepare a response to a 31-item questionnaire for each SED student who received Program services during the 1985 and 1986 fiscal years (July 1 through June 30 of each year). For purposes of this study, an SED student was defined as one who received a DSM III diagnostic classification when admitted to a program for services. Responses were received from all 24 Programs and included data sheets on all SED students; thus the results represent an entire population of diagnosed SED students

served by public education in the Network during a 2-year period in Georgia.

Results

The results will be presented in this report as follows: The data from the FY 1985 survey will be stated first with the FY 1986 data immediately following in parentheses. Any significant differences in the characteristics of the student population between the two years will be noted and discussed.

During FY 1985, 5,008 SED students received Network services and during FY 1986, 4,226 SED students received services. The smaller number of students reported for FY 1986 is due to a few Programs that were not able to supply questionnaires on all of the students served at the time of the Project deadline.

Sex and Race Characteristics

Of the SED students with DSM III diagnostic classifications, 78% (78.7%) were male and 22% (21.3%) were female. In terms of racial composition, 56.9% (55.7%) were white and 42.4% (43.5%) were black, with the few remaining being Hispanic, Native American, or "other."

Family and Siblings

The families of these SED students were fairly well divided between single parent families and families where both parents were present in the home. Single parent families comprised the home situation of 41.1% (41.9%) of the students and two-parent families were found in the home life of 45.3% (44.6%) of the students (see Table 1).

Table 1

Family Status of SED Students

Family Status	FY 1985 Frequency	FY 1985 Percent	FY 1986 Frequency	FY 1986 Percent
Single Parent	2,059	41.1	1,771	41.9
Both Parents	2,267	45.3	1,883	44.6
Foster Care	242	4.8	199	4.7
Other	440	8.8	373	8.8

The remaining 13.6% (13.5%) were either in foster homes or not living with either parent.

The great majority of the students, 91.6% (91.7%), never had a sibling who had received service in a Network Program (see Table 2). A small number of students, 7.5% (7.4%) had one

Table 2

Siblings Receiving Network Services

Number of Siblings	FY 1985 Frequency	FY 1985 Percent	FY 1986 Frequency	FY 1986 Percent
0	4,585	91.6	3,877	91.7
1	377	7.5	314	7.4
2	30	0.6	26	0.6
3 or more	16	0.3	9	0.2

sibling who was previously or currently enrolled in a Network Program, and less than 1% had either 2 or more siblings who had received Network services during each fiscal year (Table 2, above).

Age and Grade at Entry

The majority of students, 53.6% (55.3%) entered Network Programs when they were age 9 or younger (see Table 3, below). However, Table 3 indicates that entry into Network Programs is not confined to any specific age group. In both FY 1985 and 1986 the number who entered at ages 3 through 5 is in the 200 to 300 range for each year, and the number who entered at ages 6 through

15 is about equally distributed at every age during each fiscal year. During both years, the entrance figures for under age 5 or over age 15 are less than 6.5% for each age.

Table 3

Chronological Age of Students at Program Entry

Age at Entry	FY 1985 Frequency	FY 1985 Percent	FY 1985 Cumulative Percent	FY 1986 Frequency	FY 1986 Percent	FY 1986 Cumulative Percent
0	29	0.6	0.6	27	0.6	0.6
1	81	1.6	2.2	53	1.3	1.9
2	166	3.3	5.5	143	3.4	5.3
3	274	5.5	11.0	233	5.5	10.8
4	267	5.3	16.3	265	6.3	17.1
5	299	6.0	22.3	283	6.7	23.8
6	394	7.9	30.2	326	7.7	31.5
7	419	8.4	38.5	352	8.3	39.8
8	378	7.5	46.1	322	7.6	47.4
9	378	7.5	53.6	333	7.9	55.3
10	351	7.0	60.6	318	7.5	62.8
11	325	6.5	67.1	293	6.9	69.8
12	342	6.8	73.9	294	7.0	76.7
13	321	6.4	80.4	272	6.4	83.2
14	381	7.6	88.0	286	6.8	89.9
15	324	6.5	94.4	222	5.3	95.2
16	181	3.6	98.0	118	2.8	98.0
17	71	1.4	99.5	60	1.4	99.4
18	23	0.5	99.9	17	0.4	99.8
19	4	0.1	100.0	7	0.2	100.0
20	0	0.0	100.0	2	0.0	100.0

The grade a student was in at time of Program entry reflects a similar pattern (see Table 4). Preschoolers comprise the largest grade in both fiscal years. Looking at the number and percent of students who entered a Program in grades K through 9 in Table 4, it is apparent that there is no single grade of entry that is dominant. However, nearly one-half of the students, 49.6% (51.0%), entered before they finished 3rd grade. This figure is consistent with the observation from Table 3 that a similar proportion of students entering treatment were 9 years old or younger.

Table 4

Grade of Students at Time of Entry into Program

	FY 1985		FY 1986	
Grade at Entry	Frequency	Percent	Frequency	Percent
PRE	770	15.4	659	15.6
K	397	7.9	346	8.2
1	546	10.9	461	10.9
2	414	8.3	356	8.4
3	357	7.1	333	7.9
4	395	7.9	331	7.8
5	315	6.3	287	6.8
6	288	5.8	263	6.2
7	378	7.5	298	7.1
8	335	6.7	256	6.1
9	356	7.1	219	5.2
10	111	2.2	78	1.8
11	45	0.9	35	0.8
12	8	0.2	11	0.3
Other	293	5.9	293	6.9

Referral Data

In both FY 1985 and 1986, approximately three-fourths of the SED students were referred to Network Programs by their school, with referral by parents accounting for only about 9% (8.9%) of referrals (see Table 5). As Table 5 indicates, relatively few students were referred by other sources such as the Department of Family and Children's Services (DFCS), private physicians, and health departments.

Table 5

Referral Source for Students

	FY 1985		FY 1986	
Referral Source	Frequency	Percent	Frequency	Percent
School	3,686	73.6	3,101	73.4
Parent	466	9.3	378	8.9
Physician	118	2.4	104	2.5
Priv. Psychol.	30	0.6	41	1.0
Mental Health	79	1.6	79	1.9
MR Center	38	0.8	33	0.8
DFCS	167	3.3	137	3.2
Health Dept.	109	2.2	85	2.0
Juv. Court	9	0.2	11	0.3
Other	306	6.1	257	6.1

At time of referral, approximately 79% (77.9%) of the students were in public school and only about 1% in private schools during each fiscal year (see Table 6 below). The remaining 20% were either in other institutions when referred or not enrolled in any educational program.

Table 6

School at Referral Time

Referral School	FY 1985 Frequency	FY 1985 Percent	FY 198[illegible] Frequency	FY 198[illegible] Percent
Public School	3,963	79.1	3,291	77.9
Private School	56	1.1	46	1.1
Not in School	455	9.1	380	9.0
Other	533	10.6	509	12.0

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Nearly one-half of the students treated in FY 1985 and FY 1986 were in special education classrooms (either self-contained or resource) at time of referral to psychoeducational Programs (see Table 7). A large number, 1,383 (1,185), representing about 27.6% (28%) of the referrals, were in regular education at time of referral, with the remainder being served by a variety of sources such as Head Start, regional hospitals, and other psychoeducational Programs (see Table 7).

Table 7

Student's Placement at Time of Referral

Placement at Referral	FY 1985 Frequency	FY 1985 Percent	FY 1986 Frequency	FY 1986 Percent
Regular	1,383	27.6	1,185	28.0
Sp.Ed. Self-Cont.	912	18.2	745	17.6
Sp.Ed. Resource	1,470	29.4	1,208	28.6
YDC	7	0.1	3	0.1
Head Start	73	1.5	65	1.5
Regional Hospital	64	1.3	49	1.2
Other Psycho-Ed.	111	2.2	99	2.3
State School	6	0.1	9	0.2
Private Residential	38	0.8	50	1.2
Mental Health	18	0.4	14	0.3
Out of School	330	6.6	251	5.9
Other	596	11.9	548	13.0

Program Services

The survey results indicate that approximately one-half of the students in each year received Program services at a main center location, with the remaining number being served at outpost or satellite locations provided by each Program.

The particular Network school program in which the SED students were enrolled is shown in Table 8. The preschool

Table 8

Program Placement of SED Students

	FY 1985		FY 1986	
School Program	Frequency	Percent	Frequency	Percent
Preschool (3-4)	549	11.0	476	11.3
School Age (5-14)	2,892	57.7	2,544	60.2
Adolesc. (15-18)	1,567	31.3	1,206	28.5

program primarily designed for 3- and 4-year-olds had 549 (476) students, the school age program had 2,892 (2,544) students, and the adolescent program totaled 1,567 (1,206). It is apparent from further examination of the survey data that a few students are not placed in a program strictly according to age but in the program where they can be best served. For example, the survey questionnaires for both FY 1985 and 1986 indicate that it is not uncommon to find a 14-year-old in an adolescent program or a 5-year-old in a preschool program.

Most of the services to students provided by the Network were through therapeutic classes, either full day or part day. Full day services were provided for 43.1% (44.1%) of the students and part day for 37.3% (40%) as shown in Table 9 below. Other types of direct services were provided for 13.5% (11.1%) of the students in a school setting (see Table 9).

Table 9

Primary Service

Primary Service	FY 1985 Frequency	FY 1985 Percent	FY 1986 Frequency	FY 1986 Percent
Full Day	2,159	43.1	1,862	44.1
Part Day	1,870	37.3	1,691	40.0
School Only	154	3.1	118	2.8
Parent Only	150	3.0	84	2.0
Child Only	675	13.5	471	11.1

Further data from our survey indicate that of the 1,870 (1,691) students who were in part day classes at Network locations, approximately one-half spent the rest of the school day in special education resource rooms, with the other half being about equally divided between special education, self-contained classes, and regular education. Nearly 90% (90.7%) of all students served were in public schools. Of the remaining 10%, 4.3% (3.1%) were not in school, less than 1% in each year were in private school, and the remaining 5.1% (5.9%) were in a variety of other institutions.

Program Exit

During FY 1985, 38% of the SED students receiving services exited from the program. During the following year, the exit rate was 35%. All three types of exit--circumstantial, provisional, and final--were well represented in our findings (see Table 10).

Table 10

Program Exit

Exit Type	FY 1985 Frequency	FY 1985 Percent	FY 1986 Frequency	FY 1986 Percent
Circumstantial	757	39.3	580	39.7
Provisional	631	32.7	447	30.6
Final	540	28.0	435	29.8

The placement of these exited students is shown in Table 11. Approximately 38% (36.5%) of them were placed in special education classes (either self-contained or resource), with the next most common placement (20.1% (17.6%)) being in regular education.

Table 11

Placement at Program Exit

	FY 1985		FY 1986	
Exit Placement	Frequency	Percent	Frequency	Percent
Regular	387	20.1	256	17.6
Sp.Ed. Self-Cont.	321	16.7	211	14.5
Sp.Ed. Resource	419	21.7	321	22.0
YDC	61	3.2	45	3.1
Regional Hosp.	25	1.3	17	1.2
Private Resident.	25	1.3	26	1.8
WDrawn Psycho-Ed.	183	9.5	142	9.7
Moved from Area	274	14.2	225	15.4
Other	189	9.8	181	12.4
Unknown	43	2.2	34	2.4

During each school year, less than 6% were placed in more restrictive settings, i.e., youth development centers, regional hospitals, or private residential schools. About 40% (39.7%) of the exiting students were designated circumstantial exits, i.e., withdrawn by parents or moved from the Program area.

Of the adolescents who left Network Programs, 27.3% (29.9%) graduated from high school with the remainder being withdrawn from school. Since many of the students moved from the area of their Program, their subsequent status was unknown. However, nearly 17% (16.4%) were employed and 6.4% (6.0%) were enrolled in further schooling, usually vocational education.

Length of Time of Program Services

The total length of time students had been enrolled in Network Programs to the end of FY 1985 and of FY 1986 is shown in Table 12.

Table 12

Total Length of Time Enrolled in Network Programs

Enrollment Time (# Mos)	FY 1985 Frequency	FY 1985 Percent	FY 1986 Frequency	FY 1986 Percent
0-3	419	8.4	379	9.0
4-6	432	8.6	425	10.0
7-9	557	11.1	454	10.8
10-12	490	9.8	397	9.4
13-15	398	7.9	282	6.7
16-18	384	7.7	261	6.3
19-21	349	7.0	278	6.6
22-24	277	5.5	201	4.8
25-27	221	4.4	206	4.8
28-30	237	4.7	189	4.4
31-33	160	3.2	136	3.4
34-36	143	2.9	138	3.5
37-48	401	8.0	383	9.0
49 or More	540	10.8	487	12.0

Close examination of these results indicates that there is no particular length of time for receiving Program services that is characteristic of SED students. More detailed analysis of the data reveals that the median service time was around 17 months for students in each fiscal year, i.e., one-half of the SED students received services for 17 months or less. Because a large number of students received services for 49 months or longer (see Table 12), the average (mean) time of receiving Program services was longer--22.9 (23.7) months.

Grade Level Progress

Further analysis of the survey questionnaires indicates that the average gain in grade level for students was one and one-half grades from the time of entry to the end of the FY 1986 school year. Since the average length of time of enrollment was 22.9 (23.7) months, it is apparent that these SED students on average continued to progress through the grade levels while receiving Program services.

Re-Referral

An interesting finding of the survey was that once a student exited from a Program, he or she was not likely to require readmittance to Program services. Only 12.8% (13.6%) had been previously exited and then readmitted for services. Further analysis shows that approximately one-half of those students re-referred had been previously circumstantially exited, indicating that they were withdrawn or moved out of the Program area and that Program personnel did not consider their need for services ended.

Primary DSM III Diagnoses

In order to better summarize the results of the survey of the students' principal disorder*, an external consultant was asked to group the multiple DSM III diagnoses into a limited number of major categories. This suggested grouping was presented to the directors of the Network's 24 Programs for their critical review. The directors then made some modifications in the grouping based upon their experience and knowledge of student problems. The final grouping as determined by the directors is presented in Figure 1.

*Principal diagnosis according to the DSM III is the "condition that was chiefly responsible for occasioning the evaluation or admission... the main focus of attention or treatment (p. 24)."

Figure 1

Groupings of Primary DSM III Diagnoses

1. ADJUSTMENT DISORDERS

This group includes excessive maladaptive reactions to identified psychosocial stressors resulting in impairment in social functioning.

309.xx = Adjustment disorders
313.23 = Elective mutism
313.81 = Oppositional disorder
313.89 = Reaction attachment disorder
v61.20 = Parent-child problem
v61.80 = Other specified family circumstances
v62.89 = Phase of life problem

2. CONDUCT DISORDERS

The group includes problems of repetitive and persistent patterns of behavior in which the rights of others or major age-appropriate societal norms are violated, not caused by personality disorder.

312.00 = Conduct disorders
312.10 = "
312.21 = "
312.23 = "
312.90 = "
312.31 thru 312.35 = Impulse control
v71.02 = Childhood or adolescent antisocial behavior

3. ATTENTION DEFICIT DISORDERS

This group includes developmentally inappropriate attention, excessive motor activity, or impulsivity.

314.xx = Attention deficit disorders

4. PERVASIVE DEVELOPMENTAL DISORDERS and AUTISM

This group includes conditions characterized by multiple severe distortions in development of basic psychological functions including attention, perception, reality testing, motor movements, social skills, and language.

299.xx = Pervasive developmental disorders
299.00 thru 299.01 = Autism

Figure 1 (Continued)

5. PERSONALITY DISORDERS

This group includes inflexible and maladaptive personality traits involving patterns of perceiving, thinking about oneself, and relating to the environment that cause significant impairment in social functioning or distress.

301.00 thru 301.89 = Personality disorders
302.xx = Psychosexual disorders
306.51 =
313.22 = Schizoid disorder of childhood or adolescence
313.82 = Identity disorder

6. AFFECTIVE or MOOD DISORDERS

This group includes prolonged disturbances of emotions that color the entire psychic life, including depressed, irritable, or expansive moods, that are not due to other physical or mental disorders.

296.xx = Affective or mood disorders
300.40 = Depressive neurosis
301.13 = Cyclothymic disorders

7. ANXIETY or AVOIDANCE DISORDERS

This group includes excessive generalized anxiety with motor tension, autonomic hyperactivity, and apprehensive expectation; irrational avoidance of objects, situations, or people; persistent worry; obsessions and compulsions; and panic attacks. Also included in this group are irrational anxiety about physical illness and somatic disorders involving (a) physical conditions caused by psychological factors and (b) somatoform disorders such as somatic complaints, conversion disorders, psychogenic pain, and hypocondriasis.

300.00 thru 300.02 = Anxiety
300.21 thru 300.23 = Phobias
300.30 = Simple phobia
313.00 = Overanxious disorder
313.21 = Avoidant disorder of childhood
300.11 = Conversion disorder
300.70 = Hypocondriasis
300.81 = Somatization
307.10 = Eating disorder
307.50 thru 307.53 = Eating disorders
307.00 = Stuttering
307.46 = Sleepwalking disorder
307.60 = Functional enuresis
307.70 = Functional encopresis
316.00 = Psychological factors affecting physical condition

Figure 1 (Continued)

8. MENTAL RETARDATION

This group includes problems of sub-average general intelligence and adaptive functioning at mild, moderate, and profound levels.

317.xx thru 319.xx = Mental retardation

9. PSYCHOSIS or THOUGHT DISORDERS

This group includes delusions, hallucinations, incoherence, marked loosening of associations, poverty of thought content, marked illogical thinking, and behavior that is bizarre, grossly disorganized, or catatonic.

290.1x = Primary degenerative dementia
295.xx = Schizophrenia
297.xx = Paranoia
298.30 = Acute paranoia
298.90 = Atypical psychosis
300.12 thru 300.15 = Dissociative disorders
300.60 = Dissociative disorder

10. SPECIFIC DEVELOPMENTAL LEARNING PROBLEMS

This group includes impairments in single specific psychological functions involved in learning that are not due to mental retardation, pervasive developmental disorders, disease, or trauma.

315.xx = Specific developmental learning problems
v62.88 = Borderline intellectual functioning

11. ORGANIC MENTAL DISORDERS and SUBSTANCE ABUSE

This group includes (a) substance induced mental disorders with effects on the central nervous system; (b) diseases of the brain or systemic illness secondarily affecting the brain; and (c) behavioral changes associated with regular use of substances that affect the central nervous system.

290.xx = Organic mental disorders - dementias
293.xx = Organic brain syndromes - origin unknown
294.xx = Other atypical brain syndromes
291.xx = Alcohol induced mental disorders
292.xx = Other drug induced mental disorders
303.00 = Alcohol intoxication
304.xx = Substance use disorders
305.xx = Other substance induced intoxication
307.20 thru 307.23 = Stereotyped movement disorders
307.30 = Atypical stereotyped movements
310.10 = Organic personality syndrome

Figure 1 (Continued)

12. NO DIAGNOSIS or DIAGNOSIS DEFERRED

This group includes conditions not attributed to a mental disorder (v codes); diagnosis deferred (799.90); insufficient information (300.90); and no disorder present (v71.09).

799.90 = Diagnosis deferred
300.90 = Unspecified
v71.09 = No diagnosis

The summary of students' principal DSM III diagnoses utilizing the above categories is presented in Table 13 for FY 1985 and 1986. During each year, adjustment disorders was the

Table 13

Frequency of DSM III Primary Diagnoses by Grouping

	FY 1985		FY 1986	
DSM Code	Frequency	Percent	Frequency	Percent
Adjustment Disorders	1,190	23.8	1,004	23.4
Conduct Disorders	959	19.2	701	16.7
Attention Deficits	685	13.7	672	16.0
Autism	357	7.1	343	8.2
Personality Disorders	312	6.2	222	5.3
Mood Disorders	252	5.0	238	5.7
Avoidance Disorders	310	6.2	265	6.3
Retardation	232	4.6	188	4.5
Psychosis	203	4.1	173	4.1
Developmental Learning	262	5.2	197	4.7
Organic/Substance Disorders	48	1.0	30	0.7
No Diagnosis	198	3.9	163	3.9

most prevalent with conduct disorders and attention deficit disorders following in importance.

Implications

These results have several implications. First, it would appear that fairly equal numbers of children are being served in the main and satellite centers, indicating that the services are being offered as close as possible to their homes. There are

nearly four times as many boys as girls being served; this may suggest that future screening procedures and child find procedures should be focused more closely on males. Regarding race, it appears that the number of blacks and whites being served is proportionately higher than the population distribution in Georgia. There do not appear to be significant differences between the number of children served from one-parent and two-parent families, and there are fewer children from foster care placements than some might anticipate. The majority of students have no siblings in the Programs.

In reference to age and grade at entry, it is clear that children are referred throughout the grades and at all age groups with an emphasis on the early school years. It appears there is a significant dropout rate at the high school years which parallels the dropout rate for normal students. It is evident that the large majority of students are referred by their school with some referrals by parents and other agencies. Thus, the burden for identifying and referring these students rests with the schools. The wide range of placements at time of referral suggests that identification procedures are wide in scope.

Services during FY 1985 and FY 1986 reveal most students were in the school-age group, with a decreasing number in preschool and high school grades. Considering its relative importance in the child population of Georgia and P.L. 99-457, the preschool group is clearly underserved, suggesting that perhaps identification and child-find efforts are not comprehensive with this age group for this population. This is also confounded, however, by the difficulty in diagnosing and

labeling preschoolers. In terms of range of services, it is clear that there is a distribution across all primary services, indicating individualization of programs based on student need. The approximate equal distribution of full and part-day classes reflects the capacity of the Programs to provide a continuum of services based on student needs.

The Program exit data reveal that children do complete their IEP's and move to other placements. The circumstantial terminations also reveal that a number of students are removed from Programs because families move and for a variety of other reasons. The variety of placements (regular education, special education resource, special education self-contained) reveals further individualization to students' needs. The data show that a very small number exit into more restrictive placements. The length of time enrolled in Network Programs ranges widely but it is clear that few students come in for short periods of time, which is consistent with the diagnostic definition of SED. Children with severe problems need significant and long-term treatment.

The data on grade level progress indicate that many students do progress significantly in academic areas during a year of specialized treatment. At worst, the students are not losing academic skills but instead enhancing them.

Finally, the re-referral rate would indicate that most students who complete IEP's are not re-referred for further services in the Network. In fact, one-half of the students re-referred had been circumstantially exited which would not indicate adequate progress (e.g., provisional or final

termination). These data would appear to be encouraging in terms of Network success of working effectively with these students.

Summary

While it is difficult to generalize concerning the characteristics and services rendered to these students, the survey results indicate that an SED student with a DSM III diagnosis who received Network services during FY 1985 and FY 1986 was more likely to be male than female, lived with either one or two parents, and had never had a sibling who received Network services. While there was a wide variation in age and school grade at Program entry, one-half of the students were 9 years old or younger and in the 3rd grade or lower. At time of referral, they had usually been in public school, most frequently in a special education class. The Network services rendered were likely to be full or part-day classes and, on average, they received 23 months of services during which time they made progress in their academic placement. When exited from a Program, they were more likely to be placed in a special education class rather than in regular education, and were not likely to be re-referred for Network services in the future.

FURTHER CHARACTERISTICS OF GEORGIA'S SED/SBD STUDENTS: A SAMPLE SURVEY--1984-1985

Introduction

Additional information on the characteristics of students in the Network Program was developed by the use of a stratified random sample drawn from the FY 1985 severely emotionally disturbed/severely behaviorally disordered (SED) population. While financial resources limited the possibility of obtaining this additional information on the entire FY 1985 SED student population, data on 344 students representing approximately 7 per cent of the total number of students served in FY 1985 were obtained for our sample survey. This sample of the SED students served by the Network in FY 1985 was representative of the entire SED student population (5008) in important student characteristics.

Method

The study director and the coordinators selected the stratified random sample which was proportional in representation to the entire FY 1985 SED population served by the Network in regard to: (1) school program (ages 3-4, ages 5-14, ages 15-18); race; sex; program location; and the 12 DSM III categories. The desired information was obtained from each of the 24 Network Programs by requesting the Program's directors and evaluators to prepare a response to a 27 item questionnaire for the selected students.

Results

Current Service

The type of Network service rendered to the 344 selected students in the sample closely resembled that for the entire SED student population served in FY 1985. Table 1 indicates that full day service was provided for 42.7% of those in the sample; part day for 32.0%. Other types of direct services were provided for the remaining 25.3% of the students in a school setting.

Table 1

Primary Service, Sample Group, FY 1985

Primary Service	Frequency	Percent
Full Day	147	42.7
Part Day	110	32.0
Child	51	14.8
School	24	7.0
Parent	12	3.5
Total	344	100.0

Objectives/Goals

The sample questionnaire asked directors and evaluators to list annual and short term objectives or goals for each student. Improvement in socialization and behavior were stated objectives for approximately 290 of the 344 students in the survey sample with communication and academic goals stated for approximately 250 of these students. Other goals listed were pre-academic (42) and motor skills (17) (see Table 2).

Table 2

Objectives/Goals for Sample Survey Students

Objective/Goal	Frequency	Percent of Students Having Each Goal
Socialization	292	85.0
Behavior	289	84.0
Communication	250	72.7
Academic	245	71.2
Pre-Academic	42	12.2
Motor Skills	17	4.9

Achievement Level

The PIAT achievement test was the most frequently used test for students in the sample survey, being taken by 105 students (Table 3, Column 1). The Brigance was next, with 55 students taking it. Only 10 other students took the California Achievement, Georgia Criterion Referenced--4th Grade (CRT 4), or the Georgia Basic Skills Test (BST) (Table 3, Column 1).

Table 3

Achievement Test Results for SED Sample Survey
(Entries in Grade Levels)

		Math			Reading		
Frequency	Test	Mean Score	Grade Level	S.D Grade	Mean Score	Grade Level	S.D. Grade
105	PIAT	61.4	4.4	2.8	66.4	4.6	4.7
55	BRIGANCE	62.3	3.5	2.1	66.8	4.6	2.9
5	BST	301.4	-	-	315.6	-	-
4	CAL.ACH.	-	3.5	3.1	-	3.3	3.3
1	CRT-4	200.	-	-	200.	-	-
103	Other	59.6	3.6	2.0	61.7	4.1	2.9
71	None	-	-	-	-	-	-

Mathematics achievement by students was at the 4.4 grade level (PIAT test) and at the 3.5 grade level (Brigance Test, Table 3). Reading achievement was at the 4.6 grade level for students taking the PIAT and the Brigance tests. These mathematics and reading grade levels should be noted in regard to students' average grade level at program entry (grade 3) and average length of stay in the Network Programs (23 months) as revealed in the study of all students who received services in FY 1985.

IQ Tests

The IQ scores for a majority of the students (220) were obtained with the WISC-R with the next largest number obtained with the Binet (Table 4). Less than 10 students were tested with

Table 4

IQ Tests for SED Sample Survey

Test	Frequency	Mean Score	S.D.	Range
WISC-R	220	80.7	17.6	40-134
BINET	44	65.6	21.5	24-119
WAIS	9	79.0	12.0	67-105
BAILEY	8	55.0	25.3	17-93
LEITER	7	72.3	23.6	37-106
WISC	6	81.7	12.0	68-98
KAUFMAN (KABC)	4	100.0	12.7	91-108
MCCARTHY	1	60.0	-	-
OTHER	45	-	-	16-109

the WAIS, Bailey, Leiter, WISC, Kaufman or the McCarthy Tests (Table 4). The mean test scores for each test are shown along with the standard deviations (S.D.) and the ranges. The results suggest that the IQ of the sample generally represented the lower end of the average range. However, the variability indicates a

wide fluctuation. The extent to which intellectual functioning is impaired by severe emotional disturbance is unknown.

Free or Reduced School Lunch

Participation in Free or Reduced School Lunch was selected as a proxy for low family economic status. The majority of students (53%) was receiving a free or reduced price school lunch because of their family's economic status.

Problems at Referral

Directors and evaluators were asked to indicate all of the high priority problems noted at the time of staffing (placement) for each of the 344 students. For most students, three to six problems were reported. Table 5 contains categories representing composites of similar types of problems and a numerical count of the number of times the problems in each category were reported. The six most common categories of problems reported were: disruptive behaviors (12.1%); avoids peers (7.5%); peer aggression (6.6%); tantrums (5.1%); lack of concentration (4.7%); and moodiness (4.5%). Together, these six categories of problems comprised approximately 40% of those reported (Table 5).

Table 5

Problems at Referral for SED Sample Group

Problems	Number of Descriptors	Frequency	Percent	Cumulative Percent
Disruptive Behaviors	9	179	12.1	12.1
Avoids Peers	5	110	7.5	19.6
Peer Aggression	3	97	6.6	26.2
Tantrums	2	76	5.1	31.3
Lack of Concentration	2	69	4.7	36.0
Moodiness	1	67	4.5	40.5
Confidence	3	56	3.8	44.3
Overactive	1	51	3.5	47.8
Attention	3	46	3.1	50.9
Academic	1	42	2.8	53.7
Avoids Situations	3	41	2.8	56.5
Distractable	2	41	2.8	59.3
Speech	1	40	2.7	62.0
Overanxious	2	35	2.4	64.4
Aggressive Toward Property	1	34	2.3	66.7
Lying	1	31	2.1	68.8
Unorganized	2	30	2.0	70.8
Daydreams	1	30	2.0	72.8
Impulsive	1	29	2.0	74.8
Motivation	2	29	2.0	76.8
Controlling	2	27	1.8	78.6
Frustrated	2	27	1.8	80.4
Immature	1	27	1.8	82.2
Ritualistic	1	25	1.7	83.9
Physical Complaints	1	21	1.4	85.3
Aggressive Toward Self	2	21	1.4	86.7
Avoids Adults	1	19	1.3	88.0
Doesn't Follow Directions	2	19	1.3	89.3
Crying Spells	1	18	1.2	90.5
Attendance Problems	1	18	1.2	92.0
Language	1	17	1.2	93.2
Suspicious	1	16	1.1	94.3
Express Emotions	2	14	< 1%	
Curses	1	14	< 1%	
Perseveration	2	10	< 1%	
Coordination	1	10	< 1%	
Reality	1	7	< 1%	
Jealous	1	7	< 1%	
Regressive	1	6	< 1%	
Self Help Skills	1	6	< 1%	
Silliness	1	5	< 1%	
Forgetful	1	5	< 1%	
Eye Contact	1	2	< 1%	
Listening	1	2	< 1%	5.7
Totals		1476		100.0

Contacts with Parents, Schools and Agencies

The sample survey included information on the total annual staff contacts with parents, the students' schools and participating agencies. The average number of total contact hours for each student provided to parents by staff and the nature of the contacts are shown in Table 6. The most time

Table 6

Staff Contact with Parents

Type of Contact	Average Total Hours Per Student
Planning Conferences	3.78
Phone	2.34
Home Program	1.72
Observation	.73
Training	.47
Crisis Intervention	.40
Cancellations	.64*

*Cancellation data are actual number of cancellations per student, not hours.

spent in working with parents was that involving planning conferences (3.78 hours per student), phone contact (2.34 hours per student), and in home programs (1.72 hours per stduent, see Table 6).

Survey data on annual staff contact with students' schools show that an average of 2.59 hours per student was spend in contact with a student's teacher. Other contact time per student was as follows: phone contact with school, 1.27 hours; meetings with school principal, .64 hours; meetings with school counselor, .60 hours; and other school contacts, 1.07 hours.

Annual contact by staff with other agencies (per student) was as follows: Department of Family and Children's Services,

.28 hours; Department of Mental Health, .39 hours; Department of Human Resources, .35 hours; private agencies, .21 hours; and other agency contact, .31 hours.

If all of the above cited hours of contact are summed, the data reveal that the annual average hours of staff contact per student with parents, schools and agencies totaled 18.1 hours during FY 1985.

FINDINGS ON HYPOTHESES 1, 2, 3, 5 (1984-1985)

Hypothesis 1

There is no significant difference between the proportion of boys and girls in the normal population and the proportion of boys and girls in the SED sample.

An analysis of the survey data by sex reveals that the null hypothesis cannot be accepted. The Chi Square calculation indicates that the State's SED student population differs significantly in the ratio of males to females when compared with the Georgia school population (see Table 1 below).

Table 1

Male-Female Student Population and SED Students

Georgia Population	Male	Female
Ages 3-18	824,217	799,421
SED Served	3,539	972
Expected SED	2,301	2,210

The 1980 U. S. Census, adjusted by the Census Bureau for projected population change to 1984-1985, indicates that during the 1984-1985 school year, 51% of the Georgia school age population (students ages 3-18) was male and 49% female (calculated from Table 1). By contrast, it can also be determined from Table 1 that of the 4,511 SED students served by the Network, 78.5% were male and 21.5% were female. Based upon the Census determination of the school age population, it would be expected that 2,301 of the 4,511 SED students would be male and 2,210 would be female for the null hypothesis to be true

(Table 1). While the school age population was nearly equally divided between the sexes, the SED student population was between 3 and 4 to 1 male as compared to female (3,539 male, 972 female, seen in Table 1).

This analysis indicates that male students, ages 3 through 18, are much more likely to be seriously emotionally disturbed than female students of similar ages. This finding is consistent with other research which has addressed this question (references).

Hypothesis 2

There is no significant difference between the proportion of blacks and whites in the normal population and the proportion of blacks and whites in the SED sample.

The survey data indicate that this null hypothesis must be rejected. The Chi Square test indicates that there is a significant difference between the black/white ratio in the Georgia SED student population when compared with the State's entire school population of the same ages (see Table 2 below).

Table 2

Black-White Student Population and SED Students

Georgia Population	Black	White
Ages 3-18	535,057	1,078,210
SED Served*	1,830	2,648
Expected SED	1,478	3,000

The adjusted Census data indicate that the Georgia school age population during the 1984-1985 school year was 33% black and 67% white; however, the actual black/white ratio of SED students was 41% black and 59% white (calculated from Table 2). If the black and white SED student population was proportionate to the Census, the black SED population would have been 1,478 instead of the actual 1,830, and the white SED population would have been 3,000 instead of the actual 2,648 (Table 2).

Possible reasons for this discrepancy must be speculative at this time, since such an investigation is beyond the scope of this study. However, two additional findings from our survey questionnaire may contribute to an explanation. First, it can be observed that black SED students typically had only one parent in their home while white SED students usually had a two-parent home (reference to other parts of this study). This family difference may indicate less emotional support for black students than for white students and increase the prevalence of emotional disturbance among black students. A second relevant point is that the in-depth survey of 344 SED/SBD children shows that the black students are much more likely to be participants in the subsidized school lunch program than are the white students. This fact would indicate a higher black rate of poverty in the SED student population, a condition which, for many reasons, could be contributing to a greater likelihood of emotional disturbance.

Hypothesis 3

There is no significant difference between the proportion of children in the normal population in Georgia rural and urban areas and the proportion of children in the SED sample in Georgia rural and urban areas.

For purposes of this study, the 24 different Network programs were classified as either rural or urban. We designated as urban the Network programs whose geographic service area included a metropolitan area of 100,000 or more people of all ages. Using this classification, 9 Network programs were considered urban and the remaining 15 rural.

The Chi Square test shows that the null hypothesis should be accepted; there was no significant difference in the incidence of serious emotional disturbance between students in Georgia rural and urban areas (Table 3 below).

Table 3

RURAL-URBAN STUDENT POPULATION AND SED STUDENTS

Georgia Population	Rural	Urban
Ages 3-18	899,301	714,337
SED Served	2,546	1,965
Expected SED	2,515	1,996

Chi Square = 0.9154

Significance Level = .3387

Of the total SED student population, 56.4% was rural, compared to 56.0% of the normal student population; 43.5% of the SED students were urban compared to 44% of the normal student population (Table 3). Further inspection of Table 3 shows the very small difference between the actual and expected rural SED population (31) and the actual and expected urban SED population (31) out of a total of the 4,511 SED children. Apparently factors associated with an urban or rural environment in Georgia did not make a significant difference in the likelihood of a student being seriously emotionally disturbed.

Hypothesis 4

It was not possible to test Hypothesis 4 due to limitations in the available data.

Hypothesis 5

There are no significant differences among the proportions of SED children identified by chronological age as of July 1 each year compared to the normal population.

This null hypothesis postulates that the ages at which SED students are identified is proportional to the age composition of students in the normal school population. Thus, for example, if 10% of the normal school population is 6 years old, then 10% of the SED student population would be expected to be identified at age 6. This same relationship would be hypothesized to hold for successive age levels.

Since the Georgia normal school population is not summed by age, we use grade as a proxy to test this hypothesis. By state law a child must be 5 to enter kindergarten and age 6 to enter

the first grade. As this requirement holds for all children, those students subsequently identified as SED would be of the same grade and age level as normal students.

Table 5 shows the grade level at which the SED students in our survey were identified and began receiving Network program services as well as the number of such students at each grade level (Cols. 1, 2). Col. 3 shows the number that would be expected to be identified as SED if the grade of identification would be in proportion to the number of normal students in each grade. Col. 4 shows the percentage difference between the number of students identified as SED at each grade level and the expected number consistent with the null hypothesis.

Inspection of Col. 4 shows that 42% more SED students were identified at the kindergarten level than expected; 64% more than expected at the 1st-grade-level; and more identified as SED/SBD than expected at grade levels 2 through 6.

Conversely, fewer students were identified as SED/SBD than expected at grade levels 7 and above based on the proportion of students in the normal population in these grades.

A Chi-Square test comparing observed and expected SED/SBD identified students rejects the null hypothesis. The number of students identified as SED/SBD is not proportional to the number of normal students at the same grade and age level. Visual inspection of Col. 4 in Table 5 indicates that SED/SBD students tend to be identified at a younger age and lower grade level than would be indicated by the age and grade distribution of the normal school population. Considering this observation,

Table 5

Student's Grade at Entry, Observed and Expected

(1) Grade	(2) Identified as SED (number)	(3) Expected	(4) Col 2 - Col 3 / Col. 3
K	375	264	+ 42
1	510	311	+ 64
2	392	278	+ 41
3	351	264	+ 33
4	386	277	+ 39
5	295	267	+ 10
6	278	276	+ 1
7	349	273	- 22
8	279	320	- 13
9	287	350	- 18
10	82	285	- 71
11	42	249	- 83
12	6	218	- 97
TOTAL	3,632*	3,632	0

*Does not include preschool (595) or students having no identifiable grade at entry (284).

Chi Square = 793.26

Significance Level = .0001

rejection of the null hypothesis is a favorable finding since the identification of SED students at an early age has proven to be a positive factor in the successful rendering of services to these students (references).

PERSONNEL OF THE GEORGIA PSYCHOEDUCATIONAL PROGRAM NETWORK (1984-1985)

Introduction

The quality of personnel is one of the vital components of a program designed to serve SED students. Program staff should possess an appropriate educational background and the ability to meet state certification requirements for their position. Years of experience in their field, in the Network, and in their particular Program are also important considerations in evaluating personnel quality.

Method

All 24 Program directors were requested to supply detailed data on their personnel. For each position in their Program during 1984-1985, the directors provided the following information: degree held, area(s) of degree, state certification held, years of lifetime work experience, years of experience in ED/BD, years of experience in the Network, and years of experience in their particular Program. This information was received from all 24 Programs comprising the Georgia Psychoeducational Network.

Results

For purposes of analysis, all Network positions have been grouped into three major categories: (1) classroom personnel who provide direct educational services to students on a sustained basis, including lead teachers and their support teachers (aides); (2) clinical personnel who provide services to students or their families on an intermittent basis which supplements the

daily educational program, including social workers, psychologists and psychiatrists, infant program workers, parent workers, and a number of specialty therapists (speech, art, music, recreation, etc.); (3) administrative personnel who provide backup assistance and leadership for personnel in the program but do not personally provide classroom or clinical services directly to students, including Program directors and evaluators, coordinators, secretaries, clerical, and maintenance workers.

During FY 1985, the Network had 1,130 authorized positions as shown in Table 1 below. Sixty-two (62%) percent of total positions were for classroom teachers--with 349 being lead teachers and 350 teacher aides (see Table 1). Clinical personnel numbering 242 (21.4% of total personnel) included social workers (82), coordinators (61), psychologists and psychiatrists (41), infant program workers (31); parent workers (29), as well as a number of specialty therapists.

Administrative personnel (189 or 16.8% of all personnel) included: Program directors (24); Program coordinators (61); Program evaluators (17); secretaries (64); and maintenance personnel (23) (Table 1).

The educational background and the professional experience of program personnel are vital factors in determining the quality of service delivered to students. Examination of degrees held, the level and area of state certification, and work experience is necessary to guage the expertise of Network employees. Data are summarized for each of the three personnel categories in Table 1.

Table 1

Network Personnel Positions Authorized
FY 1985

Category	Authorized Positions*	# of Positions	Percent
I Classroom	Lead Teacher	349	30.9
	Teacher Aide	350	31.0
		699	61.9
II Clinical	Social Worker	82	7.3
	Social Worker Technician	19	1.7
	Infant Program	31	2.7
	Parent Worker	29	2.6
	Psychologist	35	3.1
	Psychiatrist	6	0.5
	Psychometrist	11	1.0
	School Liaison	5	0.4
	Counselor	1	0.1
	Recreational Therapist	4	0.4
	Music Therapist	2	0.2
	Vocational Teacher	3	0.3
	Art Therapist	2	0.2
	Speech Therapist	9	0.8
	Occupational Therapist	2	0.2
	Nurse	1	0.1
		242	21.4
III Admin.	Program Director	24	2.1
	Program Coordinator	61	5.4
	Program Evaluator	17	1.5
	Secretary	64	5.7
	Maintenance, etc.	23	2.1
		189	16.8
TOTAL AUTHORIZED POSITIONS		1,130	100.1

*At the end of the reporting period for FY 1985, 85 of the 1,130 authorized positions were unfilled. They included: lead teacher 34; teacher aide 32; social worker 4; infant worker 1; psychologist 1; psychometrist 2; program coordinator 5; secretary 1; and maintenance workers 5.

I. Classroom Personnel Degrees

Of the 315 lead teachers employed during FY 1985, 170 held B.S. or B.A. degrees; 142 had Masters degrees; and 3 had 6th-year specialists degrees (Table 2). The great majority (270) of teacher aides had a high school degree, 11 had two years of college; 36 had a bachelor's degree; and 1 had a master's degree (see Table 2).

Table 2

Degrees Held
Classroom Personnel, FY 1985

Degrees	Lead Teachers	Aides
Less than High School	0	0
High School	0	270
2 Years College	0	11
BA/BS	170	36
Master's	142	1
6th Year Cert.	3	0
Doctorate	0	0
TOTAL	315	318

Certificate level. Further analysis of our data showed that lead teachers held state certification at levels which were generally in keeping with their years of college education. Our survey revealed that 171 teachers had level 4 certificates, 136 held level 5 certification, and 3 were certified at level 6. The teacher aide position does not require teacher certification. However, all aides receive training which eventually enables them to earn Rank 1 or 2 classification under the State Merit System. Our study showed that of the 318 aides, 174 had achieved Rank 1 and 67 had attained Rank 2. In addition, 3 had teacher

certification (grade 4), and the remaining 74 were working toward State Merit Rating.

Area of certification. In-depth training in behavioral disorders (BD) is the most appropriate educational background for Network teachers. Of the 315 lead teachers, 271 were certified in BD, 22 in BD Interrelated, with the remaining 22 in a variety of different areas applicable to their classroom duties (Table 3).

Table 3

Areas of Certification
Lead Teachers, FY 1985

Areas	# of Lead Teachers
Behavior Disorders (BD)	271
BD Interrelated	22
Elementary Ed.	6
Behavioral Science	6
Mental Retardation	5
Other*	5
TOTAL	315

*Psychology (2), Art (1), Social Science (1), Physical Ed. (1).

Teacher aides do not receive area certification, although the Rank 1 or 2 Merit System ranking is evidence of adequate training in working with SED students.

Experience. Lead teachers employed during FY 1985 had an average of over 5 years' experience in Emotionally Disturbed (ED), Behavioral Disorder (BD) work, and 4-1/2 years' experience in the Network, almost all of which was in the particular Program where they were employed (Table 4). Teacher aides generally had less experience: a little over 4 years in ED/BD, which was

also obtained mainly in the Program in which they were employed during FY 1985 (Table 4).

Table 4

Mean Years of Work Experience
Classroom Personnel, FY 1985

Title	Lifetime Work Exp.	ED/BD	Network	Program
Lead Teachers	6.7	5.3	4.6	4.5
Aides	4.8	4.2	4.1	4.0

II. Clinical Personnel

There are a number of Network personnel who work with students or their families on a regular but not on a daily basis. These include social workers, infant program staff, psychologists, psychiatrists, and special therapists such as speech, recreation, music, art, etc., listed in Table 1 above.

Degrees. The degrees held by clinical personnel employed during FY 1985 are shown in Table 5 below. Inspection of this table shows that the majority of clinical personnel (85) held either BA/BS or a master's degree (104). The bachelor's degree was mainly held by social workers, infant and parent workers, and social worker technicians, while master's degrees were mostly held by social workers (5), psychologists (14), psychometrists (8), and parent workers (8). Sixth-year certificates were mostly held by psychologists (11) as were doctorates (9), while psychiatrists held the required MD degree (6). Overall, the educational background of clinical personnel was high, with only

16 of the 234 workers having less than a bachelor's degree Table 5).

Table 5
Highest Degree Held
Clinical Personnel, FY 1985

Degrees	Social Workers	Social Wk. Technician	Infant Workers	Parent Workers	Psychologists	Psychiatrists	Psychometrists	School Liaison	Spec.Therapists	Row Total
H.S.	0	4	4	2	0	0	0	0	0	10
2-Yr.Coll.	0	0	1	5	0	0	0	0	0	6
BA or BS	28	10	18	13	0	0	1	1	14	85
Masters	50	5	6	8	14	0	8	4	9	104
6th-Year	0	0	1	1	11	0	0	0	0	13
Doctorate	0	0	0	0	9	6	0	0	1	16
Col. Total	78	19	30	29	34	6	9	5	24	234

Certificate level. Clinical workers generally held state certification at level 4 or 5, with 86 workers certified at level 4, and 93 at level 6 (Table 6 below). The level of certification

Table 6

Certification, Clinical Personnel
FY 1985

Certificate Level	Social Workers	Social Worker Technicians	Infant Workers	Parent Workers	Psychologist	Psychiatrists	Psychometrists	School Liaison	Spec. Therapists	Row Total
NONE	1	3	2	2	0	0	0	0	2	10
4	28	12	18	13	0	0	1	1	13	86
5	42	3	7	8	13	0	8	4	8	93
6	7	1	3	6	13	0	0	0	0	30
7	0	0	0	0	8	6	0	0	1	15
Column Total	78	19	30	29	34	6	9	5	24	234

for each occupational group tended to reflect their years of education at the bachelor's level and higher. For example, personnel with the BA/BS degree tended to have level 4 certificates; those with master's, level 5, etc., through the doctorate at level 7 (see Table 6).

Area of Certification

The areas of certification for clinical personnel are shown in Table 7. Of the 78 social workers, 46 were certified in social work, 18 as visiting teachers, and 7 in BD. The remainder (7) were certified in a number of different job-related areas.

Table 7

Areas of Certification
Clinical Personnel
FY 1985

Area	Social Workers	Social Worker Tech.	Infant Workers	Parent Workers	Psychologists	School Liaison Workers
Behavior Dis.	7	1	15	1	1	4
Behavioral Sci.		1	1	1		
Early Childhood		1		1		
Elem. Education			4	1		
Family Therapy	1					
Homemaking				1		
Infant Care			1			
Learning Disab.	2					
Mental Health				4		
Mental Retard.	1		1			
Psychology				1	11	
Recreation				1		
Social Science		1				
Social Work	46	11	7	12		
Sociology		2		5		
School Counsel.	1	2				
School Psych.	1		1		21	
School Psychom.	1				1	
Visiting Teach.	18			1		1
TOTAL	78	19	30	29	34	5

* The following clinical personnel had area certification which was the same as their job title: Art Therapy, Music, Nurse, Occupational Therapist, Psychiatrist, Recreational Therapist, Speech Therapist (Total 39).

Most social worker technicians (11 of 19) were certified in social work; infant workers and school liaison personnel were certified mainly in BD; parent workers most commonly were certified in social work; and psychologists were certified in school and clinical psychology (Table 7). The remaining clinical staff members were certified in the same area as their occupational title, e.g., occupational therapy, art, music, speech and recreational therapy, etc.

Experience

Clinical personnel generally had more years of work experience than lead teachers and aides. The average lifetime work experience was 7.1 years, with 5.6 years of that experience in ED/BD (Table 8). Nearly all of that ED/BD experience (5.3 years) was gained in the particular Network Program in which they were employed during FY 1985.

Table 8
Clinical Workers' Mean Years of Experience
FY 1985

No. of Personnel	Title	Lifetime Work Experience	ED/BD	Network	Program
78	Social Worker	6.9	5.6	5.4	5.4
19	Social Worker Tech.	9.6	6.3	6.1	6.1
30	Infant Worker	6.4	5.1	5.0	5.0
29	Parent Worker	7.5	6.1	5.8	5.5
34	Psychologist	7.6	5.8	5.2	5.0
6	Psychiatrist	5.3	5.0	4.7	4.5
9	Psychometrist	5.1	5.0	4.6	4.6
5	School Liaison	15.6	11.0	10.0	8.8
24	Spec. Therapist	5.2	4.4	4.1	4.1
234	All Above (average)	7.1	5.6	5.3	5.3

III. Administrative Personnel

Administrative personnel include Program directors, coordinators and evaluators, as well as secretarial and maintenance personnel (Table 1 above).

Degrees, Certifications, and Areas. Of the 24 Program directors, 10 had doctorates, 9 had 6th-year program degrees, and 5 had master's degrees. The level of state certification they held tends to correspond with the degree level of directors; 10 had level 7 certification, 9 had level 6, and 5 had level 5 certification. Considering areas of certification, 9 had certification in administration, 6 in psychology, 6 in BD, 2 in school psychology, and 1 in counseling.

The Network had 56 Program coordinators, 43 of which had master's degrees, 11 6th-year degrees, 1 had a doctorate, and 1 had a bachelor's degree. Forty four (44) had level 5 certification, 8 had level 6, 2 had level 4, and 1 had level 7. BD was the most common area of certification for coordinators, with 36 so certified. Other areas of certification and the number of coordinators certified in those areas were: psychology 6, BD interrelated 4, counseling 4, social work 3, early childhood 2, and 1 in psychometry.

Administrative personnel had the most years of work experience in all areas: lifetime, ED/BD, Network, and Program (Table 9). Directors had the most work experience of any occupational group, closely followed by Program coordinators. Evaluators, secretaries, and maintenance personnel all had

Table 9

Years of Experience
Administrative Personnel
FY 1985

Number of Personnel	Title	Lifetime Work Experience	ED/BD	Network	Program
24	Program Director	16.5	14.9	11.0	8.8
56	Coordinator	11.2	9.8	8.8	8.8
17	Program Evaluator	8.4	6.9	6.8	6.4
63	Secretary	8.9	5.7	5.6	5.6
18	Maintenance	6.4	5.7	5.6	5.6
178	(all)	10.3	8.3	7.3	6.8

more experience in Network/Program employment than classroom or clinical workers. This finding may be related to the "burnout" factor affecting classroom and clinical personnel who work closely with SED students.

COST STUDY OF SERVICES TO STUDENTS AND FAMILIES

(1984-1985)

Introduction

During FY 1985, the Georgia Psychoeducational Network served a total of 9,436 emotionally and behaviorally handicapped students (ages 0-18). Of these 4,445 were served in therapeutic classes after having been diagnosed by Network psychologists and psychiatrists as seriously emotionally disturbed and having a disability identified by a DSM III classification. These students were served in the Network programs as an alternative to institutional care or other forms of mental health services.

At a time when government must allocate its financial resources among many competing public needs, the cost to the taxpayers of the Georgia Psychoeducational Network is of paramount importance. The question is: Given the limited nature of government funds, is the Network program cost-effective?

To answer this question, Network funding sources were examined, the cost per student served was determined, and alternative treatment costs were calculated for those seriously emotionally disturbed students in therapeutic classes had they been served in other types of service delivery models.

Method

Detailed information on the cost of services for students served in the 24 Network Programs was obtained from the Annual Financial Report of the Georgia Psychoeducational Network, FY 1985, provided by the Georgia Department of Education. This

report presented full information on all funds budgeted and expended by individual Programs from state and federal sources.

Calculation of cost per student served was obtained by utilizing the Georgia State Department of Education report entitled, Summary of Services to Children, FY 1985. This report provided information on the number of students served by all 24 Programs, both in therapeutic classes and as recipients of other Network services. Data about costs of treatment in alternative service delivery systems were not available.

Results

Expenditures

Total expenditures by the Georgia Psychoeducational Network for FY 1985 were $20.4 million (Table 1). As Table 1 indicates, these funds were expended as follows: $12.9 million for the age 14 and under student population, and $7.4 million for the adolescent (ages 15-18) group. Thus, of total expenditures of $20.4 million, the 0-14 age group accounted for approximately two-thirds of total expenditures, and the 15-18 age group the remainder.

Funding for the 0-14 age group was mainly provided by the State of Georgia (61.5%) with Federal funding of a much lesser amount (2%) specifically for the pre-school program (0-4 years, Table 1). As Table 1 indicates, more than one-half the funding for the 15-18 age group was provided by federal funding, with the balance provided by the State. Some Programs received additional limited support from local school systems in the form of continued personnel assistance. Information on the monetary value of such contributions is not available.

COST STUDY, GEORGIA PSYCHOEDUCATIONAL NETWORK
FY 1985

Table 1
Expenditures, School Programs, and Sources of Funds

Programs and Sources	Expenditures *	Percent of Total Expenditures
A. State Discretionary (0-14)	$ 9,240,561.71	45.28
B. State APEG (0-14)**	3,311,245.00	16.23
C. Federal 89-313 (0-4)***	385,694.96	1.89
Total (A, B, C)	12,937,501.67	63.40
D. State Discretionary (15-18)	4,589,756.18	22.49
E. Federal VI-B (15-18)****	2,768,685.05	13.57
F. State APEG (15-18)	111,053.36	.54
Total (D, E, F)	7,469,494.59	36.60
Total (A-F)	$20,406,996.26	100.00

*Actual expenditures after adjustment for carry-over and encumbered funds.
**Adequate Program for Education in Georgia. APEG funds are for teacher positions only, although other state funds can also be used for this purpose.
***Public Law 89-313 (1965) provides grants to educate handicapped children in state operated schools.
****Public Law 94-142, Section VI-3 (1975) provides funds to aid in the education of all handicapped students.
Source: Georgia Psychoeducational Network, FY '85 Annual Financial Report.

Slightly more than one-half (52%) of Network expenditures in FY 1985 were for instructional costs (Table 2), including primarily special education teachers and aides. Non-instructional pupil services (e.g., social workers, psychologists and psychiatrists, specialty therapists, etc.) accounted for 20% of Network costs, with employee benefits

Table 2
Types of Expenditures, FY 1985

Type	Amount	Percent of Total Expenditures
Instructional Services	$10,632,045.06	52.10
Noninstructional Pupil and Family Services	4,060,992.26	19.90
Employee Benefits	2,938,607.46	14.40
Administration	1,836,629.66	9.00
Maintenance and Operatio	734,651.86	3.60
Other Expenditures	204,069.96	1.00
Total Expenditures	$20,406,996.26	100.00

costing 14% and with administrative expenses representing 9% of total costs (Table 2).

Cost per Student Served

During FY 1985, Network Programs served 9,436 students (Table 3). Based upon total Network expenditures of all types ($20.4 million, cited in Table 2) for FY 1985, the cost per student served was $2,162 (Table 3 below).

A division of costs was made between students served in therapeutic classes and those who received other services. This was achieved by allocating all of the instructional services expenses and instructors' share of employee benefits (Table 2) to

students served in class. On that basis teh final annual cost per student in class was $3,652 (Table 3).

Table 3

Expenditures Per Student

1984-1985

Categories of Students Served	Number of Students Reported Served	Expenditures per Student
A. All Students (ages 0-18)	9,436 (100%)	$ 2,162.67
B. Students Served in Therapeutic Classes Only (ages 0-18)	4,445 (47%)	3,652.74*
C. Students Receiving Noninstructional Services Only (Ages 0-18)	4,991 (53%)	835.61

* To calculate per student cost for therapeutic class service, total instructional services costs plus instructors' share of employee benefits were combined to calculate expenditures per student in class (equals $2,817.13). The per student expenditure for non-instructional services ($835.61) was added to achieve an annual per student total of $3,652.74.

For students who received noninstructional services, the annual cost per student was $835 (Table 3). This non-instructional cost per student was included in the per student cost for those served in classes, with the rationale that those in therapeutic classes also received non-instructional services such as those provided by social workers, psychologists, and other therapists.

Alternative Cost Estimates

The majority of the seriously emotionally disturbed students

served by Network Programs received therapeutic classroom services (4,445 students) in FY 1985. The annual cost per student in therapeutic classes was 3,652 (Table 3, above). Had Network services not been available to these students, the most appropriate alternative placement would have been hospitalization at the State operated Georgia Mental Health Institute where the annual cost per student was approximately $25,000, nearly 8 times as costly as Network services.

An alternative service for seriously emotionally disturbed adolescent students could have been a State operated residential outdoor therapeutic program. In Georgia the cost of such a program has been reliably estimated to be $25,000 per student per year (reference).

Finally, if juveniles are jailed for criminal acts, the U. S. Department of Justice states that the annual cost per juvenile, age 18 or under, was $24,330 per year in 1985. Some severely disturbed juveniles, if not served effectively by Network-like services, become criminal offenders.

These comparison figures indicate that if the 4,445 seriously emotionally disturbed students served in Network therapeutic classes in FY 1985 had, instead, been served by the best alternative institution, the total estimated cost would have been over $125 million, or more than 6 times the total expenditures of the Network in FY 1985 (see Table 1 above). Thus, at less than one-sixth the cost of alternative services for the seriously emotionally disturbed students served in therapeutic classes, the Network not only served these students

effectively but served also the 4,991 students who did not require therapeutic classes but who received other Network services. Thus by an appropriate measure of alternative services, the Network was cost-effective.

DISCUSSION/RECOMMENDATIONS

The results from this comprehensive descriptive study of a statewide sample (population) of SED/SBD students and their families provide a broad base for comparisons. Among the descriptive results were the finding that there is no single profile of SED/SBD students. Recommendations for further research in this area include: conducting comparisons among various groups of students, such as DSM-III diagnostic groupings across other descriptive variables; follow-up studies of selected groups of students such as preschoolers or adolescents; studies of rural/urban comparisons; and studies of academic progress for these students by groups, i.e., certificate of completion receivers, diploma receivers, and dropouts. Further studies currently being conducted are those concerning DSM-III diagnostic groupings and referral problems, continuum of services placements for referred students and terminated students, and personnel certification by geographic area as related to DSM-III diagnostic grouping.

The results from the personnel studies indicate continuing service from those staff who enter Network Programs at all levels. Of particular interest are the variety of areas of certification and the levels of certification over years. The in-service needs of the staff at the Programs are unique in terms of continuing depth and training relationships with colleges and universities. The longevity of service speaks to some of the "burnout" concerns--apparently this Network of services provides some reinforcers which are significant and supportive for a

variety of professionals in differing roles in both urban and rural settings. Additional studies here might include studies of competencies and training of administrative/classroom/supportive personnel in terms of how these factors relate to child progress in behavior, communication, socialization, academics and motor skills.

The cost data reflect significant, but not exorbitant, costs for educating these severely handicapped students. While additional cost studies might be conducted, the specificity generally associated with such studies is significant and the cost for conducting the studies might be prohibitive. Further, the contribution of local funds may also be significant on an individual Program basis. The foci for future studies in this area might include comparisons with costs of other program options, costs as related to student progress via macro-measures such as graduation, certificate of completion, or dropout status of students, or continuing comparisons with existing data in areas such as proportion of cost for instructional and non-instructional services.

Currently, manuscripts are being prepared to explicate these results with comparisons to existing research literature. Unfortunately, there are few studies against which to compare many of the results of this research project. The manuscripts will be submitted to refereed journals in the field to obtain the field's perception of the significance of these studies.

Further, additional studies are currently being conducted in the Network by of Program Directors, Program staff, doctoral students pursuing dissertations, and university personnel. Additional studies and comparisons are critical to achieving more effective services for this unique group of students and their families.

Appendices

GEORGIA PSYCHOED NETWORK RESEARCH CONSORTIUM QUESTIONNAIRE

'86/'87
☐1 FY 85
☐2 FY 86

IDENTIFICATION DATA

(1) CENTER NUMBER | (2) SYSTEM CODE | (3) STUDENT ID | (4) LOCATION OF SERVICES
☐1 MAIN ☐2 SATELLITE

DEMOGRAPHIC DATA

(5) DATE OF BIRTH
MONTH | YEAR

(6) SEX ☐1 MALE ☐2 FEMALE

(7) RACE
☐1 BLACK ☐4 NATIVE AMERICAN
☐2 WHITE ☐5 OTHER
☐3 HISPANIC

(8) FAMILY STATUS
☐1 SINGLE PARENT
☐2 BOTH PARENTS
☐3 FOSTER CARE
☐4 OTHER

(9) # OF SIBLINGS IN PROGRAM

INITIAL REFERRAL AND ENTRY DATA

(10) DATE AT ENTRY
MONTH | YEAR

(11) CA AT ENTRY
YEARS | MONTHS

(12) REFERRAL SOURCE
☐1 SCHOOL
☐2 PARENT
☐3 PHYSICIAN
☐4 PRIVATE PSYCHOL
☐5 MENTAL HEALTH
☐6 MR CENTER
☐7 DFCS
☐8 HEALTH DEPT
☐9 JUV COURT
☐10 OTHER

(13) SCHOOL AT REFERRAL
☐1 PUBLIC SCHOOL
☐2 PRIVATE SCHOOL
☐3 NOT IN SCHOOL
☐4 OTHER

(14) PLACEMENT AT TIME OF REFERRAL
☐1 REGULAR
☐2 SPEC. ED. (SELF CONT.)
☐3 SPEC. ED. (RESOURCE)
☐4 YDC
☐5 HEAD START
☐6 REGIONAL HOSP
☐7 OTHER PSYCHO-ED
☐8 STATE SCHOOL
☐9 PRIVATE RES
☐10 MENTAL HEALTH
☐11 OUT OF SCHOOL
☐12 OTHER

(15) GRADE AT ENTRY
☐1 PRE ☐7 7
☐2 K ☐8 8
☐3 1 ☐9 9
☐4 2 ☐10 10
☐5 3 ☐11 11
☐6 4 ☐12 12
☐7 5 ☐13 OTHER
☐8 6

(16) DSM III DIAGNOSTIC CLASSIFICATION (RFCL PART II)
PRIMARY CLASSIFICATION | SECONDARY CLASSIFICATION
☐1 KNOWN ☐1 KNOWN ☐3 NONE
☐2 PRESUMED ☐2 PRESUMED

SERVICES DURING YEAR

(17) PROGRAM
☐1 PRESCHOOL (3-4)
☐2 SCHOOL AGE (5-14)
☐3 ADOLESCENT (15-18)

(18) SERVICES
(MARK ONLY ONE)
THERAPY CLASSES
☐1 FULL DAY
☐2 PART DAY
DIRECT SERVICES
☐3 SCHOOL
☐4 PARENT
☐5 CHILD

(19) CURRENT SCHOOL
☐1 PUBLIC SCHOOL
☐2 PRIVATE SCHOOL
☐3 NOT IN SCHOOL
☐4 OTHER

(20) GRADE IN SCHOOL
☐1 PRE ☐6 6
☐2 K ☐7 7
☐3 1 ☐8 8
☐4 2 ☐9 9
☐5 3 ☐10 10
☐6 4 ☐11 11
☐7 5 ☐12 12
☐13 OTHER

(21) CURRENT PLACEMENT
☐1 REGULAR
☐2 SPEC. ED. (SELF-CONT.)
☐3 SPEC. ED. (RESOURCE)
☐4 YDC
☐5 HEAD START
☐6 REGIONAL HOSP.
☐7 PSYCHO. ED
☐8 STATE SCHOOL
☐9 PRIVATE RES
☐10 MENTAL HEALTH
☐11 OUT OF SCHOOL
☐12 OTHER

TERMINATION DATA (AS OF JUNE 30)

(22) TERMINATED ☐1 YES ☐2 NO

(23) DISPOSITION OF SERVICES
☐1 CIRCUMSTANTIAL
☐2 PROVISIONAL
☐3 FINAL

(24) TRACKING
☐1 YES
☐2 NO

(25) GRADE IN SCHOOL
☐1 PRE ☐5 4 ☐9 9
☐2 K ☐6 5 ☐10 10
☐3 1 ☐7 6 ☐11 11
☐4 2 ☐8 7 ☐12 12
☐13 OTHER

(26) PLACEMENT AT TERMINATION
☐1 REGULAR EDUCATION
☐2 SPEC. ED. -SELF-CONT
☐3 SPEC. ED. -RESOURCE
☐4 YDC
☐5 DHR REG. HOSPITAL
☐6 PRIVATE RESIDENTIAL
☐7 WITHDRAWN FROM SCHOOL
☐8 MOVED OUT OF AREA
☐9 OTHER
☐10 UNKNOWN

(27) ONLY FOR ADOLESCENTS WHO GRADUATE OR LEAVE SCHOOL PERMANENTLY
(MARK ONE IN SECTION A AND ONE IN SECTION B)

SECTION A
☐1 GRADUATE
☐2 WITHDRAWN

SECTION B
☐1 COLLEGE
☐2 VOC TECH
☐3 YDC
☐4 DHR MR SERVICES
☐5 COURT SYSTEM
☐6 EMPLOYED
☐7 MILITARY
☐8 DHR MENTAL HEALTH
☐9 RES PLACEMENT
☐10 MOVED OUT OF TOWN
☐11 OTHER
☐12 UNKNOWN

OTHER DATA

(28) RE-REFERRED:
☐1 YES
☐2 NO

(29) PRIOR TERMINATION
☐1 CIRCUMSTANTIAL
☐2 PROVISIONAL
☐3 FINAL
☐4 NONE

(30) LENGTH OF TREATMENT (IN MONTHS)

(31) MOST RECENT ACHIEVEMENT TEST
☐1 CRT - MATH SCORE
☐2 CRT -
☐3 BST READING SCORE
☐4 NONE

[1] FY 84/85

IDENTIFICATION DATA

(1) Center Number (2) System Code (3) Student ID

PARENT CONTACTS

(4) Number of Cancellations

100	10	1
[0]	[0]	[0]
[1]	[1]	[1]
[2]	[2]	[2]
[3]	[3]	[3]
[4]	[4]	[4]
[5]	[5]	[5]
[6]	[6]	[6]
[7]	[7]	[7]
[8]	[8]	[8]
[9]	[9]	[9]

(5) Phone

100	10	1
[0]	[0]	[0]
[1]	[1]	[1]
[2]	[2]	[2]
[3]	[3]	[3]
[4]	[4]	[4]
[5]	[5]	[5]
[6]	[6]	[6]
[7]	[7]	[7]
[8]	[8]	[8]
[9]	[9]	[9]

(6) Planning Conferences

100	10	1
[0]	[0]	[0]
[1]	[1]	[1]
[2]	[2]	[2]
[3]	[3]	[3]
[4]	[4]	[4]
[5]	[5]	[5]
[6]	[6]	[6]
[7]	[7]	[7]
[8]	[8]	[8]
[9]	[9]	[9]

(7) Counseling

100	10	1
[0]	[0]	[0]
[1]	[1]	[1]
[2]	[2]	[2]
[3]	[3]	[3]
[4]	[4]	[4]
[5]	[5]	[5]
[6]	[6]	[6]
[7]	[7]	[7]
[8]	[8]	[8]
[9]	[9]	[9]

(8) Home Prog.

100	10	1
[0]	[0]	[0]
[1]	[1]	[1]
[2]	[2]	[2]
[3]	[3]	[3]
[4]	[4]	[4]
[5]	[5]	[5]
[6]	[6]	[6]
[7]	[7]	[7]
[8]	[8]	[8]
[9]	[9]	[9]

(9) Observation

100	10	1
[0]	[0]	[0]
[1]	[1]	[1]
[2]	[2]	[2]
[3]	[3]	[3]
[4]	[4]	[4]
[5]	[5]	[5]
[6]	[6]	[6]
[7]	[7]	[7]
[8]	[8]	[8]
[9]	[9]	[9]

(10) Training

100	10	1
[0]	[0]	[0]
[1]	[1]	[1]
[2]	[2]	[2]
[3]	[3]	[3]
[4]	[4]	[4]
[5]	[5]	[5]
[6]	[6]	[6]
[7]	[7]	[7]
[8]	[8]	[8]
[9]	[9]	[9]

(11) Intervention

100	10	1
[0]	[0]	[0]
[1]	[1]	[1]
[2]	[2]	[2]
[3]	[3]	[3]
[4]	[4]	[4]
[5]	[5]	[5]
[6]	[6]	[6]
[7]	[7]	[7]
[8]	[8]	[8]
[9]	[9]	[9]

SCHOOL CONTACTS

(12) Phone

100	10	1
[0]	[0]	[0]
[1]	[1]	[1]
[2]	[2]	[2]
[3]	[3]	[3]
[4]	[4]	[4]
[5]	[5]	[5]
[6]	[6]	[6]
[7]	[7]	[7]
[8]	[8]	[8]
[9]	[9]	[9]

(13) Teacher

100	10	1
[0]	[0]	[0]
[1]	[1]	[1]
[2]	[2]	[2]
[3]	[3]	[3]
[4]	[4]	[4]
[5]	[5]	[5]
[6]	[6]	[6]
[7]	[7]	[7]
[8]	[8]	[8]
[9]	[9]	[9]

(14) Counselor

100	10	1
[0]	[0]	[0]
[1]	[1]	[1]
[2]	[2]	[2]
[3]	[3]	[3]
[4]	[4]	[4]
[5]	[5]	[5]
[6]	[6]	[6]
[7]	[7]	[7]
[8]	[8]	[8]
[9]	[9]	[9]

(15) Principal

100	10	1
[0]	[0]	[0]
[1]	[1]	[1]
[2]	[2]	[2]
[3]	[3]	[3]
[4]	[4]	[4]
[5]	[5]	[5]
[6]	[6]	[6]
[7]	[7]	[7]
[8]	[8]	[8]
[9]	[9]	[9]

(16) Other

100	10	1
[0]	[0]	[0]
[1]	[1]	[1]
[2]	[2]	[2]
[3]	[3]	[3]
[4]	[4]	[4]
[5]	[5]	[5]
[6]	[6]	[6]
[7]	[7]	[7]
[8]	[8]	[8]
[9]	[9]	[9]

AGENCY CONTACTS

(17) DFACS			(18) Mental Health			(19) Other DHR			(20) Other			(21) Private		
100	10	1	100	10	1	100	10	1	100	10	1	100	10	1
[0]	[0]	[0]	[0]	[0]	[0]	[0]	[0]	[0]	[0]	[0]	[0]	[0]	[0]	[0]
[1]	[1]	[1]	[1]	[1]	[1]	[1]	[1]	[1]	[1]	[1]	[1]	[1]	[1]	[1]
[2]	[2]	[2]	[2]	[2]	[2]	[2]	[2]	[2]	[2]	[2]	[2]	[2]	[2]	[2]
[3]	[3]	[3]	[3]	[3]	[3]	[3]	[3]	[3]	[3]	[3]	[3]	[3]	[3]	[3]
[4]	[4]	[4]	[4]	[4]	[4]	[4]	[4]	[4]	[4]	[4]	[4]	[4]	[4]	[4]
[5]	[5]	[5]	[5]	[5]	[5]	[5]	[5]	[5]	[5]	[5]	[5]	[5]	[5]	[5]
[6]	[6]	[6]	[6]	[6]	[6]	[6]	[6]	[6]	[6]	[6]	[6]	[6]	[6]	[6]
[7]	[7]	[7]	[7]	[7]	[7]	[7]	[7]	[7]	[7]	[7]	[7]	[7]	[7]	[7]
[8]	[8]	[8]	[8]	[8]	[8]	[8]	[8]	[8]	[8]	[8]	[8]	[8]	[8]	[8]
[9]	[9]	[9]	[9]	[9]	[9]	[9]	[9]	[9]	[9]	[9]	[9]	[9]	[9]	[9]

STAFFING AND IEP DESCRIPTION

(22) CURRENT SERVICES

[1] Full Day
[2] Part Day
[3] School
[4] Parent
[5] Child
[6]

(23) ANNUAL AND SHORT-TERM OBJECTIVES/GOALS

[1] Behavior
[2] Communication
[3] Socialization
[4] Academic
[5] Pre-academic

[1] Other_____
[2] Other_____
[3] Other_____
[4] Other_____
[5] Other_____

(24) ACHIEVEMENT LEVEL

	Score	Grade Level
Math	___	___
Read	___	___

[1] CRT-4
[2] CRT-8
[3] BST
[4] PIAT
[5] Brigance
[6] Calif. Achievement Test
[7] None
[8] Other _____

(25) IQ (MOST CURRENT SCORE)

[1] WISC-R
[2] WISC
[3] Binet
[4] Leiter
[5] Kaufman
[6] WAIS
[7] McCarthy
[8] Bailey
[9] French
[10] Other_____

Score ___

Note: (No Sosson or PPVT)

(26) FREE OR REDUCED LUNCH

[1] YES
[2] NO

(27) PROBLEMS AT REFERRAL (Staffing Composite)

[1]
[2]
[3]
[4]
[5]
[6]
[7]